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| Faxi  | (571) 273-8300                | Pages: | 3 pages total:                   |
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| Phone |                               | Date:  | October 16, 2006                 |
| Re:   | Application No. 09/760,169    | CC:    |                                  |
|       | Filing Date: January 12, 2001 |        |                                  |
|       | Our Ref.: 00/002 MFE          |        |                                  |

Attached are the items noted above.

Respectfully submitted,

Claire Wygand

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

## PART B - FEE(S) TRANSMITTAL

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. PROPAT, L.L.C. 425-C SOUTH SHARON AMITY ROAD -CHARLOTTE, NC 28211-2841 Ciaire Wygand 10/17/2006 TLD222 00000804 09760169 01 FC:1501 1400.09 OP 02 FC:1504 (Date) 300.00 OP FC-AGG1 PIRST NAMED INVENTOR APPLICATION NO. CONFIRMATION NO. PILING DATE ATTORNEY DOCKET NO. 09/760.169 01/12/2001 Ursula Murschall 00/002 MFE TITLE OF INVENTION: TRANSPARENT, LOW-FLAMMABILITY, UV-RESISTANT FILM MADE FROM A CRYSTALLIZABLE THERMOPLASTIC, ITS USE AND PROCESS FOR ITS PRODUCTION APPLN. TYPE SMALL ENTITY **ISSUE FEE DUE** PUBLICATION FEE DUE PREV. PAID ISSUE PEE TOTAL FEE(S) DUE DATE DUE NO \$1,700 11/13/2006 nonprovisional \$1400 \$300 EXAMINER ART UNIT CLASS-SUBCLASS BERNATZ, KEVIN M 1773 428-334000 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). ProPat, L.L.C. 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. "Fee Address" indication (or "Fee Address" indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filled for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Mitsubishi Polyester Film GmbH Wiesbaden, Germany Individual Corporation or other private group entity Government Please check the appropriate assignee category or categories (will not be printed on the patent): 4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) I Issue Fee A check is enclosed. Payment by credit card. Form PTO-2038 is attached.

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